

# State of New Hampshire

## 2015 ANNUAL REPORT

The following information shall be given as of January 1  
preceeding the due date Pursuant to RSA 304-C:80.

REPORT DUE BY April 1, 2015

ANNUAL REPORTS RECEIVED AFTER THE DUE DATE  
WILL BE ASSESSED A LATE FEE.

Filed

Date Filed: 02/23/2015

Business ID: 302789

William M. Gardner

Secretary of State

WEC 98G-21 LLC

65 LEDGESIDE ROAD  
PLYMOUTH, NH 03264

### ADDRESS OF PRINCIPAL OFFICE:

65 LEDGESIDE ROAD  
PLYMOUTH, NH 03264

### REGISTERED AGENT AND OFFICE:

HYSLIP, JOHN K C  
65 LEDGESIDE ROAD  
PLYMOUTH, NH 03264

ENTITY TYPE: LLC  
BUSINESS ID: 302789  
STATE OF DOMICILE: DELAWARE

REAL ESTATE

If changing the mailing or principal office address, please check the appropriate box and fill in the necessary information.

- ☐ The new mailing address \_\_\_\_\_  
☐ The new principal office address \_\_\_\_\_

PO Box is acceptable.

### MANAGERS

NAME AND BUSINESS ADDRESS (P.O. BOX ACCEPTABLE).  
LIST AT LEAST ONE MANAGER BELOW OR MEMBER ON RIGHT

MANA. John K.C. Hyslip  
STREET 65 Ledgeside Lane  
CITY/STATE/ZIP Plymouth NH 03264  
NAME .....  
STREET .....  
CITY/STATE/ZIP .....  
NAME .....  
STREET .....  
CITY/STATE/ZIP .....  
NAME .....  
STREET .....  
CITY/STATE/ZIP .....

### MEMBERS

NAME AND BUSINESS ADDRESS (P.O. BOX ACCEPTABLE).  
MUST LIST AT LEAST ONE MEMBER BELOW IF NO MANAGERS

NAME .....  
STREET .....  
CITY/STATE/ZIP .....  
NAME .....  
STREET .....  
CITY/STATE/ZIP .....  
NAME .....  
STREET .....  
CITY/STATE/ZIP .....  
NAME .....  
STREET .....  
CITY/STATE/ZIP .....

NAMES AND ADDRESSES OF ADDITIONAL MANAGERS/MEMBERS ARE ATTACHED

To be signed by the manager, if no manager, must be signed by a member.

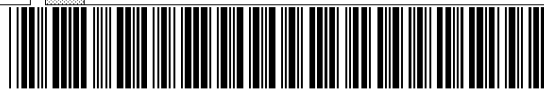
I, the undersigned, do hereby certify that the statements on this report are true to the best of my information, knowledge and belief.

Sign here: John K.C. Hyslip

Please print name and title of signer: John K.C. Hyslip / MANAGER  
NAME TITLE

FEE DUE: \$100.00

E-MAIL ADDRESS (OPTIONAL):



030278920151008

WHEN THIS FORM IS ACCEPTED BY THE SECRETARY OF STATE, BY LAW IT WILL BECOME A  
PUBLIC DOCUMENT AND ALL INFORMATION PROVIDED IS SUBJECT TO PUBLIC DISCLOSURE  
REQUIRED INFORMATION MUST BE COMPLETE OR THE REGISTRATION REPORT WILL BE REJECTED

MAKE CHECK PAYABLE TO SECRETARY OF STATE

RETURN COMPLETED REPORT AND PAYMENT TO:

New Hampshire Department of State, Annual Reports, 107 N. Main St., Room 204, Concord, NH 03301